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CONFIRMATION NO. 3198

SERIAL NUMBER 10/791,168	FILING DATE 03/02/2004	CLASS 600	GROUP ART UNIT 3736	ATTORNEY DOCKET NO.
RULE				

APPLICANTS

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** CONTINUING DATA ****

This application is a CON of 10/116,782 04/04/2002 PAT 6,890,303
 which claims benefit of 60/294,959 05/31/2001

No 6/23/06 NSN
 No 6/23/06 NN

** FOREIGN APPLICATIONS ****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 05/22/2004

** SMALL ENTITY **

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>Matthew J. Fitz</i> Examiner's Signature	Initials			

ADDRESS

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TITLE

Implantable device for monitoring aneurysm sac parameters

FILING FEE RECEIVED 459	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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